09933063

PTO/SB/06 (08-03)

Approved for use through 7/31/2006. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number Substitute for Form PTO-875 OTHER THAN CLAIMS AS FILED - PART I OR SMALL ENTITY SMALL ENTITY (Column 1) (Column 2) FOR NUMBER FILED NUMBER EXTRA RATE FEE RATE FEE BASIC FEE (37 CFR 1.16(a)) OR TOTAL CLAIMS (37 CFR 1.16(c)) minus 20 = ΩR INDEPENDENT CLAIMS (37 CFR 1.16(b)) minus 3 = = OR = MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) OR * If the difference in column 1 is less than zero, enter "0" in column 2. TOTAL TOTAL OR CLAIMS AS AMENDED - PART II OTHER THAN OR (Column 2) (Column 3) SMALL ENTITY (Column 1) SMALL ENTITY CLAIMS HIGHEST PRESENT REMAINING NUMBER RATE RATE ADDI-ADDI-ENT TIONAL **PREVIOUSLY EXTRA** AFTER TIONAL AMENDMENT PAID FOR FEE FFF ENDME Total Minus (37 CFR 1.16(c)) X S X S OR Independent (37 CFR 1.16(b)) Minus = X S OR x s FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR + \$ TOTAL TOTAL OR ADD'L FEE ADD'L FEE (Column 1) (Column 2) (Column 3) HIGHEST CLAIMS REMAINING NUMBER PRESENT RATE ADDI-RATE ADDI-ENT AFTER **PREVIOUSLY EXTRA** TIONAL TIONAL AMENDMENT PAID FOR FEE FEE Total Minus ENDME ,50 びいつ (37 CFR 1.16(c)) OR Independent (37 CFR 1.16(b)) Minus OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST PRESENT REMAINING NUMBER RATE ADDI-RATE ADDI-ENT **EXTRA** AFTER PREVIOUSLY TIONAL TIONAL AMENDMENT PAID FOR FEE FEE Total (37 CFR 1.16(c)) Minus = ENDM X \$ OR X S Independent (37 CFR 1.16(b)) Minus OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PATENT APPLICATION FEE DETERMINATION RECOR Effective October 1, 2000.					RD MARCHAE				
CLAIMS AS FILED - PART I (Column 1) (Column 2) TOTAL CLAIMS			SMALL TYPE	ENTITY	0		THAN		
20			_	FEE	7				
NUMBER FILED	NUMBER	EXTRA		+	,		FEE 710.00		
20 minus 20=	. 0		XS 9=				 		
MS U minus 3 =			-				0		
MULTIPLE DEPENDENT CLAIM PRESENT		\Box	X40=		OR	X80=	80		
* If the difference in column 1 is less than zero, enter "0" in column 2		ب	+135=		OR	+270=			
		nn 2	TOTAL		OR	TOTAL	790		
		 01	CHAL	PANTATA		OTHER			
HIGH	EST	RUMN 3)	SMALI		OR 7	SMALL			
PREVI	OUSLY E		RATE	TIONAL FEE		RATE	ADDI- TIONAL FEE		
Minus	20		X\$ 9=		OR	X\$18=			
	=	/	X40=	1 .	0	-X805	8/0		
CTIPLE DEPENDENT	CLAIM	البلا	A135-	1	1	.270	06		
- 6·					41		· · .		
(Cohu	m 2) (Cal		ADDIT, FEE	-	lou.		XLO		
HIGH	EST			ADDI		·			
PREVIO	DUSLY E		RATE	TIONAL		RATE	ADDI- TIONAL		
Minus - 2	201-		X\$ 9=			X\$18=	FEE		
Minus	5 -	\geq	X40=		l				
TIPLE DEPENDENT	CLAIM						\		
		L	+135≖		OR	+270=)		
		-	TOTAL		-	TOTAL			
/Cabus	-0) (0.1		TOTAL ADDIT. FEE		OR ,	DOIT. FEEL	\leftarrow		
(Colum	ST	imn 3)			OR A				
A STATE OF THE PERSON NAMED IN	ER PRE	SENT	ADDIT. FEE	ADDI-	OR,	DDIT. FEE	ADDI-		
HIGHE NUMB PREVIOU PAID F	ER PRE	(mn 3)		ADDI- TIONAL FEE	оя , [DDIT. FEE	ADDI- TIONAL FEE		
HIGHE NUMB PREVIOUS PAID F	ER PRE: USLY EX	SENT	ADDIT. FEE	TIONAL FEE	OR A	DDIT. FEE	TIONAL		
HIGHE NUMB PREVIOUS PAID F	ER PRE: USLY EX	SENT	RATE	TIONAL FEE	OR	RATE X\$18=	TIONAL		
HIGHE NUMB PREVIOUS PAID F	ER PRE: USLY EX	SENT TRA	RATE X\$ 9= X40=	TIONAL FEE	OR OR	RATE X\$18= X80=	TIONAL		
Ainus TIPLE DEPENDENT	ST ER PRE: USLY OR =	SENT TRA	RATE X\$ 9= X40= +135=	TIONAL FEE	OR OR	RATE X\$18= X80= +270=	TIONAL		
Ainus	ST ER PRE- USLY OR = CLAIM Of in column 3. less than 20, en	SENT TRA	RATE X\$ 9= X40= +135= TOTAL DDIT. FEE	TIONAL FEE	OR OR	RATE X\$18= X80= +270= TOTAL	TIONAL		
	S FILED - PART (Column 1) NUMBER FILED NUMBER FILED Minus 3 = RESENT RESENT RESENT RESENT RESENT (Cotumn 1) (Cotumn	Column 2) (Column 2) (Column 2) (Column 3) (Column 3) (Column 3) (Column 3) (Column 3) (Column 2) (Column 2) (Column 3) (Column 3) (Column 4) (Column 4) (Column 5) (Column 6) (Column 6) (Column 7) (Column 8) (Column 8) (Column 8) (Column 8) (Column 9) (Column	S FILED - PART I (Column 1) (Column 2) NUMBER FILED NUMBER EXTRA NUMBER FILED NUMBER EXTRA Iless than zero, enter "0" in column 2 MENDED - PART II (Column 2) (Column 3) HIGHEST NUMBER PREVIOUSLY PAID FOR Minus (Column 2) (Column 3) HIGHEST NUMBER PREVIOUSLY PAID FOR (Column 2) (Column 3) HIGHEST NUMBER PREVIOUSLY PAID FOR Minus (Column 2) (Column 3) HIGHEST NUMBER PREVIOUSLY PAID FOR Minus (Column 2) (Column 3) HIGHEST NUMBER PREVIOUSLY PAID FOR Minus (Column 2) (Column 3)	SFILED - PART I (Column 1) (Column 2) RATE NUMBER FILED NUMBER EXTRA NUMBER FILED NUMBER EXTRA X\$ 9= X40= RESENT RESENT RESENT RESENT RESENT COlumn 2) (Column 3) HIGHEST NUMBER PREVIOUSLY PAID FOR Minus RATE X\$ 9= X40= X\$ 9= X40= X\$ 9= X40= X\$ 9= X40= ATTIPLE DEPENDENT CLAIM RATE PREVIOUSLY PAID FOR PRESENT EXTRA PRESENT EXTRA PRESENT EXTRA RATE X\$ 9= X40= HIGHEST NUMBER PREVIOUSLY PAID FOR RATE X\$ 9= X40= HIGHEST NUMBER PREVIOUSLY PAID FOR RATE X\$ 9= X40= X\$ 9= X40= HIGHEST NUMBER PREVIOUSLY PAID FOR RATE X\$ 9= X40= HIGHEST NUMBER PREVIOUSLY PAID FOR RATE X\$ 9= X40= X40	TIPLE DEPENDENT CLAIM SFILED - PART I (Column 1) (Column 2) SMALL ENTITY TYPE RATE FEE BASIC FEE 355.00 X\$ 9= X40= +135= TOTAL SMALL ENTITY TYPE RATE FEE BASIC FEE 355.00 X\$ 9= X40= +135= TOTAL SMALL ENTITY FRESENT RATE FEE BASIC FEE 355.00 X\$ 9= X40= +135= TOTAL RATE FEE BASIC FEE 355.00 X\$ 9= X40= +135= TOTAL ADDITIPLE DEPENDENT CLAIM PRESENT PREVIOUSLY PAID FOR PRESENT PREVIOUSLY PAID FOR PRESENT PREVIOUSLY PAID FOR PRESENT PREVIOUSLY PAID FOR Minus SMALL ENTITY RATE TIONAL FEE X\$ 9= X40= HIGHEST NUMBER PRESENT PREVIOUSLY PAID FOR FEE X\$ 9= X40= TOTAL ADDITIPLE DEPENDENT CLAIM TIPLE DEPENDENT CLAIM TIPLE DEPENDENT CLAIM TIPLE DEPENDENT CLAIM TIPLE DEPENDENT CLAIM	SFILED - PART I (Column 1) (Column 2) NUMBER FILED NUMBER EXTRA NUMBER FILED NUMBER EXTRA RESENT Itess than zero, enter "0" in column 2 NIGHEST PREVIOUSLY PAID FOR ADDIT FEE NITIPLE DEPENDENT CLAIM Minus (Column 2) (Column 3) HIGHEST PRESENT EXTRA NITIPLE DEPENDENT CLAIM Minus (Column 2) (Column 3) HIGHEST PRESENT EXTRA PREVIOUSLY PAID FOR ADDIT FEE NAME ADDIT FEE	SFILED - PART I (Column 1) (Column 2) NUMBER FILED NUMBER EXTRA NUMBER FILED NUMBER EXTRA RESENT RATE RATE		